

## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/647,122
Filing Date	August 25, 2003
First Named Inventor	Nicholas E. FENELLI et al.
Art Unit	2861
Examiner Name	Unassigned
Attorney Docket Number	068540-0110

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are: 37 C.F.R. 10.40(c)(1)(vi) (Failure to pay bills for an unreasonable period of time.)

### CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:


☐ Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mr. Peter Amico, Airtrax, Inc.				
Address	P.O. Box 1237				
Address					
City	Hammonton	State	New Jersey	Zip	08037-1237
Country	USA				
Telephone	609-567-7800			Fax	609-567-7895

- ☐ This request is made on behalf of myself and  
☐ all the attorneys/agents of record.  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☒ the attorneys/agents associated with Customer Number

This request is enclosed in triplicate (including any attachments).

Name	Glenn Jan		
Signature		Registration No.	34,371
Date	January 23, 2004		

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.